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Irja Zare	mbok	(Depositor's name)
prouen	ll	(Signature)
12/2/0	4	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR			ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/037,307	12/31/2001	Simon M. Furnish		I. Furnish	12258-031001	4515	
TITLE OF INVENTION: MUI	LTI-FIBER CATHETER PRO	BE ARRANGE	MENT FOR T	TISSUE ANALYSIS OR TREA	TMENT		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$685		\$300	\$985	02/26/2005	
EXAM	IINER	ART UNIT		CLASS-SUBCLASS]		
IMAM,	ALI M.	3		600-407000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). [] Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. [] "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON The Control of the Con			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type)				
PLEASE NOTE: Unless as previously submitted to the (A) NAME OF ASSIGNE		no assignee dat d under separate (B)	a will appear o cover. Compl RESIDENCE	on the patent. Inclusion of assig etion of this form is NOT a sub E (CITY and STATE OR COU	mee data is only appropriate whe ostitute for filing an assignment. NTRY)	n an assignment has been	
InfraReDx, Inc. Cambridge, Massachusetts							
Please check the appropriate	assignee category or categorie	es (will not be pr	rinted on the p	atent): [] individual [X]	corporation or other private grou	p entity [] government	
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(Authorized Signature)	<u> </u>					 	

(Authorized Signature)_

7- Juliais Faustino A. Lichauco (Date) December 2, 2004 41,942

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12/07/2004 WASFAW2 00000101 10037307

01 FC:2501 02 FC:1504 685.00 OP 300.00 OP 30.00 OP



Attorney's Docket No.: 12258-031001 / InfraReDx-12

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Simon M. Furnish

Art Unit :

3737

Serial No.: 10/037,307

Examiner:

Ali M. Imam

Filed

: December 31, 2001

Confirmation No.:

4515

Notice of Allowance Date:

Title

: MULTI-FIBER CATHETER PROBE ARRANGEMENT FOR TISSUE

ANALYSIS OR TREATMENT

MAIL STOP ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

RESPONSE TO NOTICE OF ALLOWANCE

In response to the Notice of Allowance mailed November 26, 2004, enclosed are a completed issue fee transmittal form PTOL-85b and a check for \$1015 for the required issue fee and publication fee, including ten patent copies.

Please apply any additional charges or credits to our Deposit Account No. 06-1050.

Respectfully submitted,

Date: /2-2-200

Faustino A. Lichauco

Reg. No. 41,942

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